PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

3715 P2308CIPL

CLAIMS AS FILED - PART I										ENTITY	1	OTHER THAN	
F	OTAL CLAIMS		(Column 1)		(Column 2)			TYPE		OR		SMALL ENTITY	
			27					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 370.00	ОЯ	BASIC FEE	740.00	
T	OTAL CHARGE	ABLE CLAIMS	2 7 minus 20=		* 7			X\$ 9=	63.0	OR	X\$18=		
_	DEPENDENT (3 minus 3 =		·			X42=	U	OR	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+140=		1			
*	f the difference	e in column 1 is	less than z	"0" in	'0" in column 2				٥	OR	L		
	•	Y ARREAS	MENDED - PART II						TOTAL	43310	OR	i	
_	9-23-	CLAIMS	(Column 2) (Column 3)					_	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY		SENT TRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 27	Minus	** 7	27				X\$ 9=		OR	X\$18=	
AR	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT	3				X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+140=		OR	+280=	
								L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)									DDIT. FEE	<u></u>		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRES	SENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=			X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		▎╟	X42= ·			X84=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM]	│			OR	A84=	
									+140=		OR	+280=	
									TOTAL DIT. FEE	<u></u>	OR A	TOTAL DDIT. FEE	
		(Column 1)		(Columi		(Colur	nn 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRES EXT			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u> </u>	Total	*	Minus	**		-			X\$ 9=		OR	X\$18=	
¥	Independent		Minus	***		8		- }-	X42=		-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	X84=	
" If the entry in column 1 is less than the entry in column 2 write "0" in column 3											+280=		
****	the "Highest Nun	nber Previously Pai nber Previously Pai per Previously Paid	1 For IN THIS 1 For IN THIS	SPACE is I	ess than	20, ente	. •2 •		TOTAL DIT. FEE In the appr		OR Al	TOTAL DOIT. FEE mn 1.	